



"It Stresses Me Out"

Research Briefing

Background

This report describes the findings of a research project via an online survey exploring the sexual health needs of young people living in Highland, funded by NHS Highland Public Health.

The findings of the report will be used to inform the development of sexual health services in Highland.

In Scotland today, young people under the age of 25 are more likely to experience poor sexual health and wellbeing.

This evidenced by the population group continuing to see high rates of STIs – for example in 2019, 64% of all genital chlamydia diagnoses were in young people under 25¹.



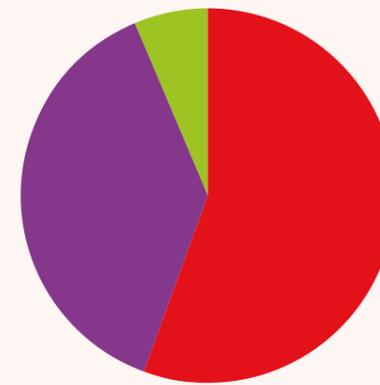
1. Public Health Scotland: Health Protection Scotland, Genital chlamydia and gonorrhoea infection in Scotland: laboratory diagnoses, 2020

Demographics

The survey gathered a total of 794 valid responses between June – September 2021. The demographics of which are as follows:

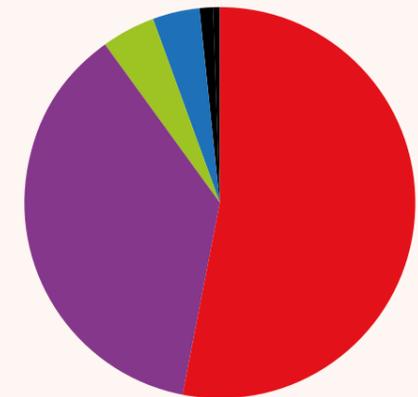
Age

55.79% 18 – 24
38.04% Under 18
6.17% 25-34



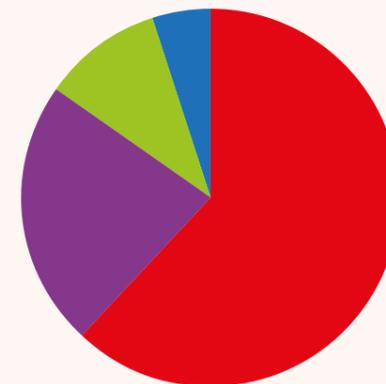
Gender

55.42% Female
38.79% Male
4.45% Transgender
4.16% Non-binary
1.63% Other



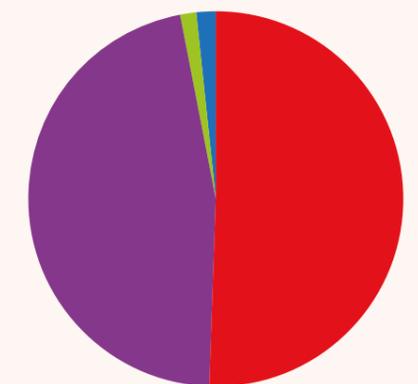
Sexual Orientation

61.08% Heterosexual/straight
22.67% Bisexual
10.08% Gay/lesbian
4.7% Other



Relationship Status

50.5% of respondents were single
46.35% were in a relationship
1.51% were married/in a civil partnership
1.13% identified in another way



Findings

Access to Sexual Health Information



A **majority** of respondents **seek information** about their sexual health **online**.



Some respondents **seek information** from their **GP** from another **health professional**.

“
Better sexual health means less stress and anxiety.
”

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Remote Engagement with Sexual Health Services



Most respondents would **prefer** to engage with sexual health services remotely through **online chat, text message, email** and **WhatsApp**.



Most respondents would prefer to access sexual health services remotely on **weekday evenings**.



Respondents were **least likely** to remotely engage through **telephone** and **video call**.



Primary barriers to engaging with sexual health services included feeling **embarrassed, anxious** or **awkward**; concerns about privacy; and a preference for in-person services.

“
...even without COVID-19 restrictions, I live in a very remote location where it can be difficult to access services easily.
”

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Access to Sexual Health Services



The barriers respondents faced when accessing sexual health services are primarily psychosocial, **with fear of being judged, discomfort talking about sexual health and feeling worried about anonymity** adversely affecting access.



Practical barriers were also listed as important, for example **opening times** of services and not knowing what was available.



Respondents listed being able to **access services anonymously** and by post as things which would make access to services easier. Respondents also rated having services available in closer locations and improving the days and times services are available as important.

“
“When talking about something as intimate and private as sexual health, I'd feel less inclined to share information over the Internet.”
”

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Postal Services



A significant majority of respondents were unaware of **postal STI testing**, while a smaller majority were **unaware of condoms by post**.



Most respondents were **likely** to use STI **postal testing** if it were available to them.



Most respondents would prefer to receive STI postal testing in **plain packaging**.

Mental Health and Sexual Health



Sexual health and wellbeing is more likely to have a **negative impact** on respondent's mental health than positive. This is due to several factors such as stigma, fear of STIs and pregnancy.

“

...if I contracted an STD I would be too afraid of being judged to get it treated when would then make me ashamed and 'dirty'.

”

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Impact of COVID-19 Pandemic



Respondents perceptions of their **sexual health and wellbeing** needs are **largely unaffected** by the Covid-19 pandemic.

Conclusion

The findings of this report show that sexual health stigma continues to be a significant barrier to accessing services for young people in Highland.

Throughout the data, respondent's highlighted fear of being judged and discomfort talking about sexual health.

Targeted training and education can bolster the provision of blended sexual health services.